

BEFORE THE STATE CORPORATION COMMISSION
OF THE STATE OF KANSAS

In the Matter of a General Investigation Into)
The Adjustment of Intrastate 8YY Access)
Charges Pursuant to the Federal Communication) Docket No. 21-GIMT-426-GIT
Commission's Reforms, Effective July 1, 2021)

SUBMISSION OF ICC CAF DATA COLLECTION AND CERTIFICATIONS

COMES NOW Wamego Telecommunications Company, Inc. and as required by
the FCC, submits the accompanying information.

Wamego Telecommunications Company, Inc. submits its company-specific
information under seal as confidential and proprietary as set forth in the letter filed
herewith.

Respectfully submitted,



Mark Doty #14526
GLEASON & DOTY, CHARTERED
P.O. Box 490
Ottawa, KS 66067
(785) 242-3775 ph
(785) 242-3855 fax
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TO BE COMPLETED BY AN OFFICER OF THE REPORTING CARRIER

Certification of Officer for Rate-of-Return Carrier Eligibility for CAF/ICC Recovery

I certify that I am an officer of the reporting carrier and that, to the best of my knowledge, the reporting carrier on this form certifies that it has complied with Eligible Recovery §51.917(d) and Access Recovery Charge §51.917(e) and is eligible to receive the CAF ICC support requested pursuant to §51.917(f).

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|--|--|--------|---|-----------------------------------|------------|
| Name of Reporting Carrier | | | | Wamego Telecommunications Company | |
| Signature of authorized officer | | | Date | | 05-26-2021 |
| Printed name of authorized officer | | | Jeff Wick | | |
| Title or position of authorized officer | | | General Manager | | |
| Telephone number of authorized officer: | | | (785) 456-1000 | | |
| Study Area Code of Reporting Carrier | | 411845 | Filing Due Date for this form (mm/dd/yyyy) | 06/16/2021 | |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | | | | | |

TO BE COMPLETED BY THE REPORTING CARRIER,

Certification of Officer as to the Accuracy of the CAF ICC Data Reported

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the actual data reported; and, to the best of my knowledge, the information reported on this form is accurate.

Name of Reporting Carrier **Wamego Telecommunications Company**

Signature of Authorized Officer

Date **05-26-2021**

Printed name of Authorized Officer **Jeff Wick**

Title or position of Authorized Officer **General Manager**

Telephone number of Authorized Officer: **(785) 456-1000** ext.

Study Area Code of Reporting Carrier

411845

Filing Due Date for this form
(mm/dd/yyyy)

06/16/2021

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TO BE COMPLETED BY AN OFFICER OF THE REPORTING CARRIER

Certification of Officer for Rate-of-Return Carrier Not Seeking Duplicative Recovery

I certify that I am an officer of the reporting carrier and that, to the best of my knowledge, this reporting carrier is not seeking duplicative recovery in the state jurisdiction for any Eligible Recovery subject to the recovery mechanism as per 51.917(d)(vii).

| | | | | | |
|--|--|--------|---|-----------------------------------|------------|
| Name of Reporting Carrier | | | | Wamego Telecommunications Company | |
| Signature of authorized officer | | | Date | | 05-26-2021 |
| Printed name of authorized officer | | | Jeff Wick | | |
| Title or position of authorized officer | | | General Manager | | |
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